



Attorney Docket No. 990204/LH

IN THE UNITED STATES PATENT
AND TRADEMARK OFFICE

Applicant(s) : Hideyuki OMURA et al

Serial No. : 09/281,710

Filed : 30 Mar 1999

Art Unit : 2874

**REQUEST FOR CORRECTED
FILING RECEIPT**

Assistant Commissioner for Patents

ATTN: APPLICATIONS BRANCH

Sir:

Please issue a corrected Filing Receipt correcting the error indicated in red on the accompanying copy. Please also correct the Patent Office records.

Under FOREIGN APPLICATIONS,
change "1092056" to --10-92056--. See the Letter Re: Filing Receipt submitted concomitantly with the Executed Declaration and Accurate English Translation.

Frishauf, Holtz, Goodman,
Langer & Chick, P.C.
767 Third Avenue - 25th Fl.
New York, N.Y. 10017-2023
Tel (212) 319-4900
Fax (212) 319-5101
LH/pob

Respectfully submitted,

Leonard Holtz
Reg.No. 22,974

CERTIFICATE OF MAILING

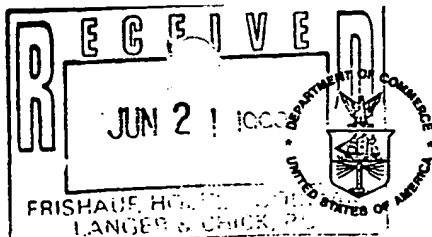
I hereby certify this correspondence is being deposited with the United States Postal Service as First Class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on the date noted below.

Attorney: Leonard Holtz

Dated: June 22, 1999

#6

FILING RECEIPT
CORRECTED



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

Receipt

| APPLICATION NUMBER | FILING DATE | GRP ART UNIT | FIL FEE REC'D | ATTORNEY DOCKET NO. | DRWGS | TOT CL | IND CL |
|--------------------|-------------|--------------|---------------|---------------------|-------|--------|--------|
| 09/281,710 | 03/30/99 | 2874 | \$890.00 | 990204/LH | 6 | 1 | 1 |

FRISHAUF HOLTZ GOODMAN
LANGER & CHICK PC
767 THIRD AVENUE
25TH FLOOR
NEW YORK NY 10017-2023



FILE COPY

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

HIDEYUKI OMURA, TOKYO, JAPAN; HIDEYUKI NASU, TOKYO, JAPAN.

FOREIGN APPLICATIONS- JAPAN

1092056

04/03/98

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 04/20/99

TITLE

EXTERNAL CAVITY LASER

PRELIMINARY CLASS: 372

10-92056

DATA ENTRY BY: DIXON, DOROTHY L.

TEAM: 04 DATE: 06/15/99



| | | | | | | |
|---|---|---|-------------------------|---|-------------------|-------------------------|
| SERIAL NUMBER 09/281,710 | FILING DATE 03/30/99 | CLASS 372 | GROUP ART UNIT 2874 | ATTORNEY DOCKET NO. 990204/LH | | |
| APPLICANT | HIDEYUKI OMURA, CHIGASAKI-SHI, JAPAN; HIDEYUKI NASU, HIRATSUKA-SHI, JAPAN. | | | | | |
| | **CONTINUING DOMESTIC DATA***** VERIFIED _____ | | | | | |
| | **371 (NAT'L STAGE) DATA***** VERIFIED _____ | | | | | |
| | **FOREIGN APPLICATIONS***** VERIFIED JAPAN 10-92056 04/03/98 _____ | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED 04/20/99 | | | | | | |
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY JPX | SHEETS DRAWING 6 | TOTAL CLAIMS 1 | INDEPENDENT CLAIMS 1 |
| Verified and Acknowledged | | Examiner's Initials _____ | Initials _____ | | | |
| ADDRESS | FRISHAUF HOLTZ GOODMAN LANGER & CHICK PC 767 THIRD AVENUE 25TH FLOOR NEW YORK NY 10017-2023 | | | | | |
| | EXTERNAL CAVITY LASER | | | | | |
| TITLE | | | | | | |
| | | | | | | |
| FILING FEE RECEIVED \$890 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |